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Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> FINLAND	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 29	<b>INDEPENDENT CLAIMS</b> 4
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<b>TITLE</b> Filtering of electronic information to be transferred to a terminal					
<b>FILING FEE RECEIVED</b> 952	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issued ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____		